

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	N.A		05/21/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	BZ	897	06-11-01
RESPONSE FORMALITY REVIEW			
527 7608			

53 08348  
5728 396  
5690 952  
66 53688  
545679  
531 2390  
531 2389

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral)... Canceled      A ..... Appeal  
÷ ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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